

Change of Address

3533

Part I Complete This Part to Change Your Home Mailing Address

Complete this part if the address change affects individual income tax returns. (Forms 540, 540A, 540 2EZ, or Long or Short Form 540NR)

► If your last return was a joint return and you are now establishing a separate residence, check the box. ☐

1a Your first name	Initial	Last name	1b Your SSN or ITIN
2a Spouse's first name	Initial	Last name	2b Spouse's SSN or ITIN
3 Prior name(s) See instructions.			
4a Old address (no., street, city or town, state, and ZIP Code). If a PO box, foreign address, or PMB no., see instructions.			Apt. no.
4b Spouse's old address , (no., street, city or town, state, and ZIP Code). If a PO box, foreign address, or PMB no., see instructions.			Apt. no.
5a New address (no., street, city or town, state, and ZIP Code). If a PO box, foreign address, or PMB no., see instructions.			Apt. no.

Part II Complete This Part to Change Your Business Mailing Address or Business Location Address

Check ALL boxes this change affects:		7b California corporation number
6 <input type="checkbox"/> Business, Estate, or Trust returns (Forms 541, 565, 568, 100, 100W, 100S, 109, and 199)		7c Secretary of State file number
7a <input type="checkbox"/> Business, Estate, or Trust location (Also complete line 11)		8b FEIN
8a Business, Estate, or Trust name		
9 Old mailing address. If a PO box, foreign address, or PMB no., see instructions.		
No.	Street	City or Town State ZIP Code
10 New mailing address. If a PO box, foreign address, or PMB no., see instructions.		
No.	Street	City or Town State ZIP Code
11 New business location address. If a PO box, foreign address, or PMB no., see instructions.		
No.	Street	City or Town State ZIP Code

Part III Signature

Please Sign Here (see instructions)

Daytime telephone number of person to contact (optional) ► ()

► Your signature	► Date	► If Part II completed, signature of owner, officer, or representative	► Date
► If joint return, spouse's signature	► Date	► Title	

For Privacy Notice (Individual), get form FTB 1131.

A Purpose

Use this form to change your home or business mailing address or your business location. This address change will be used for any future correspondence. Generally, complete only one form FTB 3533 to change your home or business address. If this change also affects the mailing address for your children who filed separate tax returns, complete a separate form FTB 3533 for each child. If you are a representative filing for the taxpayer, attach a copy of your power of attorney to this form.

Note: You may also call our toll-free number (800) 852-5711 for a change of address. If you call the FTB and report a change of address, you do not need to file this form.

B Prior Name(s)

If you or your spouse changed your name because of marriage, divorce, etc., complete line 3.

C Addresses

Include any apartment, room, suite number, or private mail box (PMB) in the address field. Write the acronym "PMB" first, then the box number. Example: 111 Main St. PMB 123.

D PO Box

If your post office does not deliver mail to your street address, show your PO box number instead of your street address.

E Foreign Address

If your address is outside the United States or its possessions or territories, enter the information in the following order: city, province or state, and country. Follow the country's practice for entering the postal code. Do not abbreviate the country name.

F Signature

If you complete Part II, the owner, officer, or a representative must sign. An officer is the president, vice president, treasurer, chief accounting officer, etc. A representative is a person who maintains a valid power of attorney to handle tax matters.

G Where to File

Mail this form to:

FRANCHISE TAX BOARD
PO BOX 942840
SACRAMENTO CA 94240-0002

Note: If you moved after you filed your return and you are expecting a refund, notify the post office serving your old address to assist in forwarding your check to the new address.